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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/032,378	10/26/2001	Michael D. Hooven	HOOV 112

Cook, Alex, McFarron, Manzo,
Cummings & Mehler, Ltd.
Suite 2850
200 West Adams Street
Chicago, IL 60606



CONFIRMATION NO. 6155
FORMALITIES LETTER



OC00000007411507

Date Mailed: 02/01/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 740 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).
- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 870.

03/22/2002 BABRAHA1 00000050 10032378

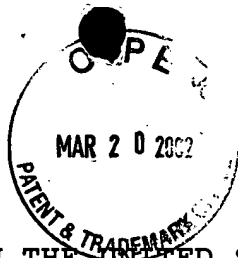
01 FC:201 370.00 OP
02 FC:205 65.00 OP
03 FC:202 42.00 OP

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



PATENT
Attorney Docket No. HOOV 112

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Michael D. Hooven, et al.

Serial No.: 10/032,378

Filed: October 26, 2001

Examiner:

Art Unit: 3739

For: TRANSMURAL ABLATION DEVICE WITH
INTEGRAL EKG SENSOR

) I hereby certify that this correspondence
) is being deposited with the United States
) Postal Service as first class mail in an
) envelope addressed to:

) Commissioner for Patents
) Washington, D.C. 20231 on:

) on March 11, 2002

) *Christine A. Barglik*
) Christine A. Barglik

) Date: March 11, 2002

Commissioner for Patents
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

Dear Sir:

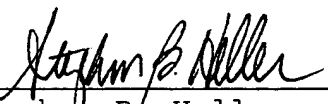
There is an error in the Filing Receipt received for the above-identified patent application.

The Filing Receipt indicates only one Applicant, when, in fact, there are two Applicants. The name of the missing Applicant is Joao Manuel Godinho deQueiroz e Melo.

The Filing Receipt also incorrectly indicates that this application is DIV of 09/844,225, filed April 4, 2001, however, this application is a CIP of 09/844,225, filed April 4, 27, 2001. Correction of the Filing Receipt is respectfully requested.

A copy of the Filing Receipt indicating the requested corrections is attached.

Respectfully submitted,



Stephen B. Heller
Registration No. 30,181

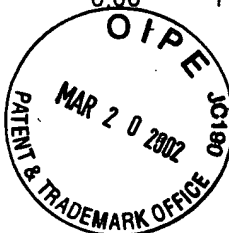
COOK, ALEX, McFARRON, MANZO,
CUMMINGS & MEHLER, LTD.
200 West Adams Street - Suite 2850
Chicago, IL 60606
(312) 236-8500



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
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WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/032,378	10/26/2001	3739	0.00	HOOV 112	35	9	2



CONFIRMATION NO. 6155

FILING RECEIPT



OC000000007411506

Cook, Alex, McFarron, Manzo,
Cummings & Mehler, Ltd.
Suite 2850
200 West Adams Street
Chicago, IL 60606

Date Mailed: 02/01/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Michael D. Hooven, Residence Not Provided;

João Manuel Godinho de Queiroz e Melo

Domestic Priority data as claimed by applicant

THIS APPLICATION IS A DIV OF 09/844,225 04/27/2001

WHICH IS A CIP OF 09/747,609 12/22/2000

WHICH CLAIMS BENEFIT OF 60/200,072 04/27/2000

Foreign Applications

If Required, Foreign Filing License Granted 02/01/2002

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

Title

Transmural ablation device with integral EKG sensor

Preliminary Class

Attorney

CASE	HOOV 112
ATTY.	GWK / SZH
DATE	2/1/02
<i>Missing Parts due 4/01/02</i>	



Use a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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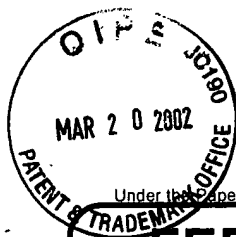
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/032,378	
	Filing Date	October 26, 2001	
	First Named Inventor	Michael D. Hooven, et al.	
	Group Art Unit	3739	
	Examiner Name		
Total Number of Pages in This Submission		Attorney Docket Number	HOOV 112

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply - Preliminary	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	- Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	- Request for Corrected Filing Receipt
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	- Copy of Corrected Filing Receipt
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	- Part 2 of Notice To File Missing Parts
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Stephen B. Heller
Signature	<i>Stephen B. Heller</i>
Date	March 11, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>March 11, 2002</u>			
Typed or printed name	Christine A. Barglik	Date	March 11, 2002
Signature	<i>Christine A. Barglik</i>		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/17 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 477.00

Complete if Known

Application Number	10/032,378
Filing Date	October 26, 2001
First Named Inventor	Michael D. Hooven, et al.
Examiner Name	
Group Art Unit	3739
Attorney Docket No.	HOOV 112

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 50/1039
Deposit Account Name: Cook, Alex, McFarron, Manzo, Cummings & Mehler, Ltd.

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 160	214 80	Provisional filing fee	

SUBTOTAL (1) (\$) 370.00

2. EXTRA CLAIM FEES

Total Claims: 18
Independent Claims: 4
Multiple Dependent Claims: 14

Extra Claims: 0
Fee from below: 0.00
Fee Paid: 0.00

Extra Claims: 1
Fee from below: 42.00
Fee Paid: 42.00

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 84	202 42	Independent claims in excess of 3
104 280	204 140	Multiple dependent claim, if not paid
109 84	209 42	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 42.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	65.00
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for ex parte reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 400	216 200	Extension for reply within second month	
117 920	217 460	Extension for reply within third month	
118 1,440	218 720	Extension for reply within fourth month	
128 1,960	228 980	Extension for reply within fifth month	
119 320	219 160	Notice of Appeal	
120 320	220 160	Filing a brief in support of an appeal	
121 280	221 140	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,280	241 640	Petition to revive - unintentional	
142 1,280	242 640	Utility issue fee (or reissue)	
143 460	243 230	Design issue fee	
144 620	244 310	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR 1.17(q)	
126 180	126 180	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))	
179 740	279 370	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 65.00

SUBMITTED BY

Name (Print/Type)	Stephen B. Heller	Registration No. (Attorney/Agent)	30,181	Telephone	(312) 236-8500
Signature		Date	March 11, 2002		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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